

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	SW	32	9/6
FORMALITY REVIEW	YG	956	10/03/01
RESPONSE FORMALITY REVIEW	AM	917	11-20-01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	22/03
	8.8.03
	9.19.04
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Claim	Date
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	3.19.04
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
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36/900  
 10/03/9  
 85  
 11/20/01